

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF OKLAHOMA

WILLIAM RAY SPRAY, JR., and
RHONDA JEAN SPRAY, Individually)
and as Personal Representatives)
of the ESTATE OF SINDI LUCILLE

SPRAY, Deceased,

Plaintiff(s),

-vs
Case No. CIV-20-1252-C

BOARD OF COUNTY COMMISSIONERS

OF OKLAHOMA COUNTY, in its

Official Capacity as Governing

Body of the County of Oklahoma

County,

Defendant(s).

DEPOSITION OF SHIRLEY HADDEN (F/K/A REISCH), RN

TAKEN ON BEHALF OF THE PLAINTIFF (S)

IN OKLAHOMA CITY, OKLAHOMA

ON SEPTEMBER 26, 2022

REPORTED BY: LESLIE A. FOSTER, RPR

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1	A	Yes.
2	Q	What led you to Turn Key?
3	A	I had a
4	Q	To
5	A	I had a friend who worked for the company that
6	went to L	PN school with me.
7	Q	Who is that friend?
8	A	Shaelyn Vap.
9	Q	Is she still with Turn Key?
10	A	No.
11	Q	When you went with Turn Key, did you understand
12	that Turn	Key provided services at detention facilities?
13	A	Yes.
14	Q	When you were in Tulsa let me see I think
15	you said	you were there for about two years?
16	A	Correct.
17	Q	Okay. Was it the Tulsa County Jail?
18	A	Correct.
19	Q	And you were the DON?
20	A	I was their DON for approximately six weeks,
21	and then	I was promoted to their health services
22	administr	ator.
23	Q	At Tulsa?
24	A	Correct.
25	Q	I think you said you went there because of a

```
1
    promotion?
2
          A
               Correct.
3
               At that time that you actually went to Tulsa,
          Q
4
    were you thinking that the promotion was just a DON or do
5
    you think the health services administrator position was
6
    going to be yours?
7
          A
               Yes.
8
               Both?
          Q
          Α
               Both.
10
               Okay.
          Q
11
         A
               Yes.
12
               While you were the -- what -- regardless of
          0
13
    your position, while you were there at Tulsa for a couple
14
    years roughly --
15
         Α
               Uh-huh.
16
               -- did you have deaths in the jail?
          Q
17
               At Tulsa County?
          A
18
               Yes.
          Q
19
         Α
               Yes.
20
               At what rate?
          Q
21
          Α
               One to zero per year.
22
               Per year.
                          Right?
          0
23
          Α
               Correct.
24
               The Oklahoma County Jail, it's more like about
          Q
25
    one every three weeks or so, is it not?
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1	MS. AH LOY: Form.
2	${f Q}$ (BY MR. SHADID) Do you know the answer as far
3	as the rate of deaths at Oklahoma County?
4	A Approximately 12 to 14 a year.
5	${f Q}$ If it's 12 to 14 a year, that's about one a
6	month?
7	A Correct.
8	Q Are you aware that there's already been 14 this
9	year, and we're not to the end of the year?
10	A Correct.
11	${f Q}$ Are you aware of how many deaths happened in
12	2017 at Oklahoma County?
13	A No.
14	Q I know you weren't there then?
15	A No.
16	Q I'm just asking if you were aware?
17	A No, I'm not.
18	Q Are you aware your first full year was 2019
19	at Oklahoma County. Right?
20	A Correct.
21	Q Do you know how many deaths occurred at the
22	Oklahoma County Jail in 2019?
23	A No.
24	Q Was it do you think it was about the same
25	rate that we've just mentioned, maybe one a month?

1	A I don't know the answer to that.
2	$oldsymbol{Q}$ You'd agree, then, though, that the rate of
3	deaths at the Oklahoma County Jail far, far exceeds the
4	number of deaths on average that happened at the Tulsa
5	County Jail while you were there?
6	MS. AH LOY: Form.
7	Go ahead.
8	THE WITNESS: Okay.
9	$oldsymbol{Q}$ (BY MR. SHADID) Would you agree with that?
10	A Yes.
11	$oldsymbol{\mathtt{Q}}$ Can you tell us about how many detainees or
12	inmates are housed at the Tulsa County Jail?
13	A Approximately 1400.
14	Q And at the Oklahoma County Jail, is it about
15	15-, 1600 now?
16	A Approximately 1660.
17	Q About 1660?
18	A Yeah.
19	Q You're aware, are you not, that the Oklahoma
20	County Jail was not designed to hold that many people?
21	A Correct.
22	Q That's not a secret to you; you've heard that?
23	A Correct.
24	Q Have you, yourself, ever been responsible for
25	creating any of the written policies regarding the

1	first one	decided to take a second reading a few minutes
2	later.	
3		Regardless of a reason, it is a second reading?
4	A	Correct.
5	Q	And it's taken, according to this anyway, oh,
6	about eig	ht minutes later?
7	A	Correct.
8	Q	Are the time entries in all these medical
9	records e	ntered by the computer, or is that an entry
10	that's ac	tually put in by the provider?
11	A	These are manual entries.
12	Q	The time is manual entry?
13	A	Oh, no, sorry. It's timestamped at the time
14	the entry	is placed into the EMR.
15	Q	Okay. Obviously, that the readings
16	themselve	s are manual entries?
17	A	Correct.
18	Q	The next day on December 14th at 11:00 A.M., we
19	have anot	her set of vitals that are shown here. And now
20	we have b	lood pressure at 140 over 69. We have pulse at
21	149. Rig	ht?
22	A	Yes.
23	Q	That's pretty much tachycardic, isn't it?
24	A	Yes, sir.
25	Q	Normal pulse is between 70 and 80?

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1	A	Less than a hundred, yes.
2	Q	Less than a hundred is considered normal?
3	A	Yes, sir.
4	Q	Got any medical books that say less than a
5	hundred i	s normal?
6	A	Yes, sir.
7	Q	Do you know which ones they are?
8	A	No, sir.
9	Q	Because most people are between 70 and 80.
10	Right?	
11	A	It really depends on your health status, but on
12	average.	
13	Q	On average, most people are between 70 and 80?
14	A	Well, sir, my pulse runs about 80.
15	Q	Okay. My question was most people are supposed
16	to be bet	ween 70 and 80. Correct? Somewhere in there?
17	A	Again, it a normal pulse is below a hundred
18	and above	50.
19	Q	Well, 149 is definitely not normal, is it?
20	A	Correct.
21	Q	And the next entry for December 14th was
22	according	to this that evening at about 7:55. Do you
23	see that	one?
24	A	Yes, sir.
25	Q	And the pulse has gone up. Right?

1 A Yes, sir. 2 Now it's 165. That's really high, isn't it? Q 3 A Yes, sir. 4 Do you see anything in the chart -- well, Q 5 strike that. I'll be back to that question in a minute. 6 Sorry. 7 When we get to December 15th, at 12:08 P.M., 8 there's a pulse entry of 92. 9 Yes, sir. A 10 That's still considered somewhat elevated, is Q 11 it not, compared to an average of 70 to 80? Do you agree 12 or not? 13 A It -- it can be slightly elevated. 14 Okay. Then we get to the morning of Q 15 December 16, at 10:37, and this shows a pulse of a 16 hundred. 17 A Yes. 18 A pulse of 149's not really good, is it? Q 19 No, sir. A 20 Q A pulse of 165 is really not good, is it? 21 Yes, sir. A 22 It's not, is it? 0 23 A It's not. It's not good. 24 Pulse of 92 is not particularly good, is it? Q 25 It's in the range of normal. A

1 And a pulse of a hundred, not really good, is Q 2 it? 3 Correct. A 4 You have the medical chart in front of you, Q 5 Exhibit 17. Please show me anywhere within the medical 6 chart where a healthcare provider performed a workup, a 7 physical examination, or any other type of workup to find 8 out what was going on with this elevated pulse, this 9 tachycardia. 10 MS. AH LOY: Form. 11 (BY MR. SHADID) Is there anything there? Q 12 Α I'm not aware of a note by a provider. 13 On the chart entry that you made on page 106 of Q 14 Exhibit 17, you have no entry for pulse. Correct? 15 A Correct. 16 Did you take a pulse? Q 17 I would have, sir. But --A 18 Q But you didn't remember it? 19 No, sir. A 20 Q And you didn't take a blood pressure -- or I'll 21 strike that. Did you take a blood pressure? 22 I don't know the answer to that. Α 23 In the chart entry that you made, it says Q 24 "Patient" -- I'm in the middle of it. It says "Patient 25 complained of body aches." Where were the body aches?

1	A They were generalized. They were all over.
2	Q All over?
3	And she said that it hurt to take a breath
4	or I'm sorry. That it hurts to take breaths. She told
5	you that she thought the worst part of detox was over.
6	Is that correct?
7	A Correct.
8	
	Q But still felt really bad. That's what you
9	wrote?
10	A Yes, sir.
11	Q Did anybody perform any type of medical workup
12	to find out the source of her pain?
13	A It would have been heroin withdrawals.
14	Q I didn't ask that.
15	A Okay.
16	Q I asked if anybody did a medical workup to find
17	out the source of her pain. And I'm talking about, now,
18	on the morning
19	A Uh-huh.
20	Q of December 16th.
21	A All of her the clinical evaluation I did was
22	consistent with heroin withdraw.
23	Q You don't get to make diagnoses, do you?
24	A No, sir.
25	Q Is there any healthcare provider that performed
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1
     a workup on the morning of December 16th to find out the
 2
     source of the pain?
         A
 3
               No, sir.
 4
               Okay.
          0
               But I can make an -- a nursing diagnosis, which
 5
          A
 6
     is different than a medical diagnosis.
 7
               I'm talking about a medical diagnosis.
          Q
          A
               No, sir.
 8
               When you write that no distress is noted after
 9
          Q
     a patient says that -- that she still felt really bad,
10
     what does that mean when you say "no distress is noted"?
11
               She was stable.
12
          A
               In this entire chart, did any -- is there any
13
     record of any healthcare provider -- I'm not talking
14
     about nurses. I apologize. Let me restate it.
15
               Any doctors performing a workup on Ms. Spray?
16
                    Just of them being notified.
17
         A
               There was a notification to a doctor one time
18
     on December 14th. Is that correct?
19
               MS. AH LOY: Form.
20
              (BY MR. SHADID) In fact, it wasn't a doctor; it
21
     was a nurse practitioner, was it not?
22
               On December 13th, there's a note.
23
          A
               Where are you looking?
24
          0
               The one right above mine.
25
          A
                                                            Page 56
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1	A	Correct.
2	Q	So approximately 10:37 A.M. or thereabouts,
3	somebody	would have come by to talk to Sindi Spray at her
4	cell?	
5	A	Correct.
6	Q	And just asked these questions?
7	A	No, sir.
8	Q	I'm sorry. What?
9	A	That's not how we do our evaluations. We don't
10	ask quest	ion by question.
11	Q	Well, how do you know it says as an
12	example,	"No nausea, no vomiting."
13	A	So we ask, "What symptoms are you having?" So
14	that info	rmation is given to us by the inmate.
15	Q	By the MA?
16	A	Inmate.
17	Q	Oh, by the inmate. I'm sorry?
18	A	Yes. By our patients. Yeah. They tell us
19	what symp	toms they're having. So the way our detox
20	evaluatio	ns are done are based on observation, what we're
21	told, and	a set of vital signs.
22	Q	Okay. On this particular one for
23	December	16th, at 10:37 A.M., we have a person named
24	Terry Ben	ski who is the person that according to
25	this w	as engaging with Sindi Spray. Do you know who